

USPTO
00991**UTILITYPATENT APPLICATION****TRANSMITTAL**

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No. 02922.000205

First Named Inventor or Application Identifier

SOTOMITSU IKEDA

Express Mail Label No.

22857 U.S. PTO
10/809444

032604

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

ADDRESS TO:Mail Stop Patent Application
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

- | | |
|---|--|
| 1. <input type="checkbox"/> Fee Transmittal Form (Submit an original, and a duplicate for fee processing) | 7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) |
| 2. <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. | 8. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) |
| 3. <input checked="" type="checkbox"/> Specification Total Pages 45 | a. <input type="checkbox"/> Computer Readable Form (CRF) |
| 4. <input checked="" type="checkbox"/> Drawing(s) (35 USC 113) Total Sheets 7 | b. Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> paper |
| 5. <input checked="" type="checkbox"/> Oath or Declaration Total Pages 1 | c. <input type="checkbox"/> Statements verifying identity of above copies |
| a. <input type="checkbox"/> 1 Newly executed (original or copy) | |
| b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 17 completed) | |
| i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed Statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). | |
| 6. <input checked="" type="checkbox"/> Application Data Sheet. See 37 CFR 1.76 | |

| | | |
|---|--|---|
| ACCOMPANYING APPLICATION PARTS | | |
| 9. <input checked="" type="checkbox"/> | Assignment Papers (cover sheet & document(s)) | |
| 10. <input type="checkbox"/> | 37 CFR 3.73(b) Statement (when there is an assignee) | <input type="checkbox"/> Power of Attorney |
| 11. <input type="checkbox"/> | English Translation Document (if applicable) | |
| 12. <input checked="" type="checkbox"/> | Information Disclosure Statement (IDS)/PTO-1449 | <input checked="" type="checkbox"/> Copies of IDS Citations |
| 13. <input type="checkbox"/> | Preliminary Amendment | |
| 14. <input checked="" type="checkbox"/> | Return Receipt Postcard (MPEP 503) (Should be specifically itemized) | |
| 15. <input type="checkbox"/> | Certified Copy of Priority Document(s) (if foreign priority is claimed) | |
| 16. <input type="checkbox"/> | Other: _____ | |

17. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information:

Continuation Divisional Continuation-in-part (CIP) of prior application No. ____ / ____
 Prior application information: Examiner _____ Group/Art Unit: _____

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

18. CORRESPONDENCE ADDRESS

| | | |
|---|--|--|
| <input checked="" type="checkbox"/> Customer Number or Bar Code Label | 05514 (Insert Customer No. or Attach bar code label here) | or <input type="checkbox"/> Correspondence address below |
| NAME _____ | | |
| Address _____ | | |
| City _____ | State _____ | Zip Code _____ |
| Country _____ | Telephone _____ | Fax _____ |

| CLAIMS | (1) FOR | (2) NUMBER FILED | (3) NUMBER EXTRA | (4) RATE | (5) CALCULATIONS |
|--------|--|------------------|------------------|-------------------------------|------------------|
| | TOTAL CLAIMS (37 CFR 1.16(c)) | 10-20 = | 0 | X \$ 18.00 = | \$0 |
| | INDEPENDENT CLAIMS (37 CFR 1.16(b)) | 2-3 = | 0 | X \$ 86.00 = | \$0 |
| | MULTIPLE DEPENDENT CLAIMS (if applicable) (37 CFR 1.16(d)) | | | \$290.00 = | \$0 |
| | | | | BASIC FEE (37 CFR 1.16(e)) | \$770.00 |
| | | | | Total of above Calculations = | \$770.00 |
| | Reduction by 50% for filing by small entity (Note 37 CFR 1.9, 1.27, 1.28). | | | | 0 |
| | | | | TOTAL = | \$770.00 |

19. Small entity status

- a. A small entity statement is enclosed
- b. A small entity statement was filed in the prior nonprovisional application and such status is still proper and desired.
- c. Is no longer claimed.

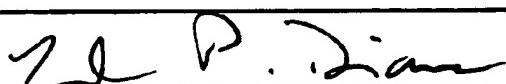
20. A check in the amount of \$ 770.00 to cover the filing fee is enclosed.

21. A check in the amount of \$ 40.00 to cover the recordal fee is enclosed.

22. The Commissioner is hereby authorized to credit overpayments or charge the following fees to Deposit Account No. 06-1205:

- a. Fees required under 37 CFR 1.16.
- b. Fees required under 37 CFR 1.17.
- c. Fees required under 37 CFR 1.18.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED

| | |
|-----------|---|
| NAME | Leonard P. Diana (Reg. No. 29,296) |
| SIGNATURE |  |
| DATE | March 25, 2004 |

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